File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073 FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

2010 001 18 PH 12: 1,7

COMMITTEE NAME (Must be same as on Statement of Orga	anization)			
Larry Ford For Superus SIMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (6) City Candisubdivision Candidate (8) County PAC (9) City PAC (10) School 11) Local Ballot Issue CANDIDATE COMMITTEES ONLY:	2)State PAC (3)State Party didate (7)School Board or Other Political Board or Other Political Subdivision PAC	(Re		DISCLOSURE REPORT
Candidate Name	Political Party (if applicable)	Sca	nned	
Larry Ford	Democrat	1 1	·	
Ciffice Sought County supervisor	District (if Senate or House)	Aud	lited	
Late reports are subject to possible civil and criminal penalties. Pur	rsuant to lowa Code sections 68B.32A(7) and 68A.	401(3), the car	ndidate, for a
candidate's committee, and the chairperson, for any other type of committee and the chairperson, for any other type of committee and the chairperson, for any other type of committee and the chairperson, for any other type of committee and the chairperson, for any other type of committee and the chairperson, for any other type of committee and the chairperson, for any other type of committee and the chairperson, for any other type of committee and the chairperson, for any other type of committee and the chairperson, for any other type of committee and the chairperson, for any other type of committee and the chairperson	Committee, is the individual responsible for the individual re		oely and accura -(5-2 DATE S	
1 AM FILING A 10-14-10	DEPORT FOR (4) ELECTION ((0)MON 5	FOTION VE	
(report date)	REPORT FOR (1) ELECTION /(Indicate by #		LECTION TE	AR.
CHECK IF AMENDMENT TO REPORT DATED	<u> </u>		ittees, enter Da	
Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed	10	ounty & Loc hich Electic		, enter County in
STATEMENT OF CASH ON HANG)			
CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is fi	cash on hand at the end	.,\$)
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Sched	ule A) (*also see in-kind below)		<u>_a</u> ,	000.00
Schedule F: Loans Received total (Attach Schedule	F)	*******		0-
Schedule H: Total Sales of Campaign Property (Atta	ich Schedule H)			0-
(Schedule H applies to Candidates' Come	mittees Only) SUB-TOTAL	\$	20	000-00
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	•			_
Schedule B: Expenditures total (Attach Schedule B)	(**also see debts and loans below)		149	1,93
* Schedule F: Loan Repayments total (Attach Schedu	le F)		0	
CASH ON HAND at the end of this reporting period (If final rep	port balance must be zero)	\$	50	2.07
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	-	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sche				
**OUTSTANDING LOANS (From Schedule F - Attach Schedu	•			
CONSULTANT BREAKDOWN (Schedule G Attached?)	•		YES X	NO
CANDIDATE COMMITTEES ONLY:				
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Atta	nch Schedule H)	\$		

Reset Form

SCHEDULE

MONETARY

For instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

(Rev. 07/03) RECEIPTS

COMMITTEE NAME (Must be same as on Statement of Organization)

Larry Ford For Supervisor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION DISCLOSURE BOARD.

THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FO FUND- RAISEF INCOM
8-27-10	ID#	Larry Ford			***************************************
, ,,,,,,	CK#	Larry Ford 307 w. Main Tingley, Ja. 50863		\$	
······································	ID#	1. ng 1ey, 2 g. 30863	self	2000	
	CK#	, and the second			
-	ID#			<u> </u>	
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				7
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				<u> </u>
			SUB-TOTAL		
		TOTAL //f last one	e of this schedule)	\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____of ___

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form	SCHEDULE	
COUNT	B (Rev. 07/03)	MONETARY EXPENDITURES
SISLATIVE IMN AND THE	CHE(CK THIS BOY IS

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

AMENDING FORM COMMITTEE NAME (Must be same as on Statement of Organization) bor Supervisor CANDIDATE NAME AND ADDRESS TO WHOM DATE PURPOSE ID NUMBER AMOUNT **EXPENDITURE EXPENDED** (DESCRIBE TRANSACTION) (if applicable) EXPENDED (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER 1D# 18159 Laura Lilienthal Purchased parade 612 E. 1-st street 9-5-10 CK# I \$ 68.-Modrid, Jan. 50516 Candy 10# 18159 Yard signs Mt. Ayr Record News 10-4-10 Posts + Pens CK# 2 122 W. Madison 1429.93 Advertising Mt. Ayr, 10. 50954 ID# CK# ID# CK# ID# CK# ID# CK# ID# CK# ID# CK# SUB-TOTAL

		COMMITTEES	

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(I).)

	 		_
		•	
Page	 of		

TOTAL (if last page of this schedule)

1497.93